

BOARD OF COUNTY COMMISSIONERS

LUCAS COUNTY, OHIO

APPLICATION FOR A PUBLIC VOLUNTEER

CITIZENS LEVY REVIEW COMMITTEE

ONE GOVERNMENT CENTER

SUITE 800

TOLEDO, OHIO 43604

NAME OF APPLICANT: _____
First Middle Last

ADDRESS: _____
Street City/State Zip Code

TELEPHONE: _____
Work Fax Home

EMAIL ADDRESS: _____

APPOINTMENT APPLYING FOR: CITIZENS LEVY REVIEW COMMITTEE

Are you related to any current employee of Lucas County: No Yes
If yes, give name and position _____

Do you serve on any other public or not-for-profit boards? No Yes
If yes, please identify _____

Are you a defendant or plaintiff in any pending civil law suits that could impact your service on this public board? No Yes
If yes, please identify _____

Have you ever been convicted of a violation of any law, other than minor traffic offenses?
If so, please provide details:

If you are responsible for child support obligations, is your obligation current?
Yes No Does Not Apply

TARGETED COMMITTEE SEATS:

Please circle all targeted committee seat areas that apply to you.

Public Sector	Labor	Senior Citizen
Business Sector	Non-Profit Sector	Fiscal / Accounting Sector

EDUCATION:

High School _____ Date of Graduation _____

Post-High School Education _____

MILITARY HISTORY:

Branch of Service _____
Discharge Date _____ Type of Discharge _____
Highest Rank _____

EMPLOYMENT HISTORY:

Present or last employer _____
Your title/duties _____

Dates of Employment _____ to _____
Previous employment (list employers, position, dates of employment)

REFERENCE:

(List three persons not related to you who you have definite personal knowledge of your qualifications for this position)

Name	Address	Telephone
_____	_____	_____
_____	_____	_____
_____	_____	_____

STATEMENT:

Please provide a brief statement as to why you feel you are qualified for this appointment. **If you are seeking re-appointment, please indicate what your contributions have been to the committee/commission during the time of your service. For re-appointment, please state your meeting attendance history.**

Please include any other information here that you feel would be of importance to the Commissioners in the selection process.

Are you aware of any circumstances that exist or could exist that would create a conflict of interest or the appearance of a conflict of interest if you are appointed to this board? No Yes
If yes, please explain _____

I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that any false statements will void this application and any actions based on it.

SIGNATURE OF APPLICANT _____ DATE _____

Please submit a detailed resume with this form and return to the Lucas County Administrator at One Government Center, Suite #800, Toledo, Ohio 43604-2259.